Case 16-32867-KLP Doc 15 Filed 07/04/16 Entered 07/04/16 17:28:13 Desc Main Document

Fill in this infor	mation to identify your	case:		
Debtor 1	Stephen Michael	Maitland		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF VIRGINIA	
Case number	16-32867			
(if known)				☐ Check if to amended

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

you	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		·
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	481.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	481.00
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	40,396.24
	Your total liabilities	\$	40,396.24
Par	13: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,172.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,180.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	, family, or

- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,200.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 16-32867-KLP Doc 15 Filed 07/04/16 Entered 07/04/16 17:28:13 Desc Main Document Fill in this information to identify your case and this filing: Debtor 1 Stephen Michael Maitland Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Case number 16-32867 Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No □ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe.....

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No

Yes. Describe.....

household goods furniture and appliances

\$200.00

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Page 4 of 43 Document Case number (if known) 16-32867 Debtor 1 Stephen Michael Maitland \$100.00 Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$100.00 Clothes Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$400.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No

Cash

\$10.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No

Official Form 106A/B Schedule A/B: Property

Case 16-32867-KLP Doc 15 Filed 07/04/16 Entered 07/04/16 17:28:13 Desc Main Page 5 of 43 Case number (if known) 16-32867 Document Debtor 1 Stephen Michael Maitland Institution name: Yes..... Bank of America-Debtor is unsure whether this account is open at this time \$30.00 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: \$40.00 Retirement accounts 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 3

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D(Stephen with aer wantanu		asc number (ii known)	10-32001
	_			claims or exemptions.
28.	. Tax refunds owed to you			·
	□ No			
	Yes. Give specific information about the	nem, including whether you already filed the returns an	d the tax years	
		2045 Ctata Dafiunda Takan bu MOV fan	7	
		2015 State Refunds-Taken by MCV for medical bills	State	\$0.00
		2015 Federal Refunds-Received \$193.00 and already spent	Federal	\$0.00
	Family support Examples: Past due or lump sum alimo No □ Yes. Give specific information	ny, spousal support, child support, maintenance, divor	ce settlement, property	settlement
30.	. Other amounts someone owes you Examples: Unpaid wages, disability insubenefits; unpaid loans you note to No Yes. Give specific information	urance payments, disability benefits, sick pay, vacation nade to someone else	pay, workers' compe	nsation, Social Security
	·			
		Personal Injury Actions, Workmans Compens Judgments owed to Debtor-None owed at thi		\$1.00
	Interests in insurance policies Examples: Health, disability, or life insur No □ Yes. Name the insurance company of Company in			nce Surrender or refund value:
32.	. Any interest in property that is due you lif you are the beneficiary of a living trust someone has died.	ou from someone who has died t, expect proceeds from a life insurance policy, or are o	currently entitled to rec	
	No			
	☐ Yes. Give specific information			
33.	 Claims against third parties, whether Examples: Accidents, employment disp No 	or not you have filed a lawsuit or made a demand tutes, insurance claims, or rights to sue	or payment	
	Yes. Describe each claim			
34.	. Other contingent and unliquidated cla	aims of every nature, including counterclaims of th	e debtor and rights to	set off claims
	■ No			
	☐ Yes. Describe each claim			
35.	 Any financial assets you did not alrea No 	dy list		
	☐ Yes. Give specific information			
36		ntries from Part 4, including any entries for pages y		\$81.00
Рa	Describe Any Business-Related Prope	erty You Own or Have an Interest In. List any real estate in	Part 1.	

Case 16-32867-KLP Doc 15 Filed 07/04/16 Entered 07/04/16 17:28:13 Desc Main Page 7 of 43 Case number (if known) 16-32867 Document Debtor 1 Stephen Michael Maitland 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8:

55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$400.00 Part 4: Total financial assets, line 36 58. \$81.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$481.00 \$481.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$481.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this info	rmation to identify your	case:		
Debtor 1	Stephen Michael	Maitland		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number	16-32867			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Pro	perty You Claim as Exemp
--------------------------	--------------------------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	e Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Check only one box for each exemption. Schedule A/B			
household goods furniture and appliances	\$200.00		\$200.00	Va. Code Ann. § 34-26(4a)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Electronics Line from Schedule A/B: 7.1	\$100.00		\$100.00	Va. Code Ann. § 34-26(4a)
Line IIom Schedule A.B. 1.1			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$100.00		\$100.00	Va. Code Ann. § 34-26(4)
Line nom Schedule A/B. 1111			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$10.00		\$10.00	Va. Code Ann. § 34-4
Line nom Schedule A.B. 10.1			100% of fair market value, up to any applicable statutory limit	
Checking: Bank of America-Debtor is unsure whether this account is open	\$30.00		\$30.00	Va. Code Ann. § 34-4
at this time Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	

Entered 07/04/16 17:28:13 Document Page 9 of 43 Debtor 1 Stephen Michael Maitland Case number (if known) 16-32867 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Retirement accounts Va. Code Ann. § 34-34 \$40.00 \$40.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 07/04/16

Case 16-32867-KLP

Yes

Doc 15

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Fill in this infor	mation to identify your	case:		
Debtor 1	Stephen Michael	Maitland		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
_	16-32867			
(if known)				☐ Check if this is a
				amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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	Cas	10-32007-INLF	D0C 13	ocument	Page 11 of	107704710 17. 43	.20.13	Des	Civiairi
Filli	in this info	ormation to identify your							
Deb	tor 1	Stephen Michael	Maitland						
		First Name	Middle Nar	ne	Last Name	-			
	tor 2								
(Spot	use if, filing)	First Name	Middle Nar	ne	Last Name				
Unit	ed States	Bankruptcy Court for the:	EASTERN DI	STRICT OF VIR	RGINIA				
	e number	16-32867							
(if kno	own)								if this is an
								amend	led filing
∩ffi	icial Fo	rm 106E/F							
		E/F: Creditors W	ho Have I	Insecured	l Claime				12/15
		and accurate as possible. Us					DDIODITY -	Jaima II	
eft. A name	Attach the C and case	editors Who Have Claims Sec Continuation Page to this pag number (if known).	je. If you have no	information to re					
		t All of Your PRIORITY Un							
		ditors have priority unsecure	d claims against	you?					
	☐ No. Go t	o Part 2.							
	Yes.								
i I	identify wha possible, lis	our priority unsecured claims t type of claim it is. If a claim ha t the claims in alphabetical orde ore than one creditor holds a pa	as both priority and er according to the	d nonpriority amou e creditor's name. I	nts, list that claim here a If you have more than tw	nd show both priority a	nd nonpriori	ty amoun	ts. As much as
((For an expl	lanation of each type of claim, s	see the instruction	s for this form in th	ne instruction booklet.)				
						Total claim	Priority amount		Nonpriority amount
2.1	Comi	monwealth of VA-Tax	Las	at 4 digits of accor	unt number	\$0.00	amount	\$0.00	\$0.00
		Creditor's Name					- <u> </u>	+ 0.00	
	_	ox 2156	Wh	en was the debt i	ncurred?		-		
		mond, VA 23218 er Street City State Zlp Code	As	of the date you fil	e, the claim is: Check a	all that apply			
		rred the debt? Check one.		Contingent	,				
	■ Debtor	1 only	_	Unliquidated					
	☐ Debtor	2 only		Disputed					
	☐ Debtor	1 and Debtor 2 only	Тур	e of PRIORITY ur	nsecured claim:				
	_	t one of the debtors and anothe	er 🗆	Domestic support	obligations				
		if this claim is for a commur	_	Taxes and certain	other debts you owe the	government			
		m subject to offset?	_		r personal injury while yo	•			
	■ No	•	_	Other. Specify					
	☐ Yes		_						

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Debto	or 1 Stephen Michael Maitland		Case number (if know)	16-32867	
2.2	Internal Revenue Service	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name Insolvency Unit Post Office Box 21126 Philadelphia, PA 19114	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply		
١	Who incurred the debt? Check one.	☐ Contingent			
I	Debtor 1 only	☐ Unliquidated			
I	Debtor 2 only	☐ Disputed			
I	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
I	\square At least one of the debtors and another	☐ Domestic support obligations			
I	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you	owe the government		
I	s the claim subject to offset?	☐ Claims for death or personal injury	while you were intoxicated		
	No	Other. Specify			
I	Yes				
Part 2	List All of Your NONPRIORITY Unsecu	red Claims			
3. D	o any creditors have nonpriority unsecured claim	is against you?			
	No. You have nothing to report in this part. Submit	this form to the court with your other sche	edules.		
	l _{Yes} .	•			
ur th:	st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each cl an one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify what t	ype of claim it is. Do not list cla	ims already included in	Part 1. If more
	···-			Total o	laim
4.1	Chippenham Johnston Willis	Last 4 digits of account number	2830		\$21,183.00
	Nonpriority Creditor's Name 7101 Jahnke Road	When was the debt incurred?	2015-2016		
	Richmond, VA 23225 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	•	11.7		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	\square Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce the	at you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debt	e	
			y piano, and other offilial debt	.	
	Yes	Other, Specify Medical			

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4.2	Commonwealth Radiology	Last 4 digits of account number	per 4669	\$30.00
	Nonpriority Creditor's Name 1508 Willow Lawn Drive	When was the debt incurred?	2015-2016	
	Ste 117 Richmond, VA 23230 Number Street City State Zlp Code	As of the date you file, the cla	im is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sereport as priority claims	separation agreement or divorce that you did not	
	No		aring plans, and other similar debts	
		·	anny piano, and other similar debio	
	Yes	Other. Specify medical		
4.3	Credit Control Corp Nonpriority Creditor's Name	Last 4 digits of account numb	per <u>1564</u>	\$593.00
	Po Box 120568 Newport News, VA 23612	When was the debt incurred?	Opened 8/01/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sreport as priority claims	separation agreement or divorce that you did not	
	No	Debts to pension or profit-sh	aring plans, and other similar debts	
	☐ Yes	Other. Specify Collection	on Attorney Community Mem. enter Er	
4.4	Credit Control Corp	Last 4 digits of account numb	er <u>2532</u>	\$488.00
	Nonpriority Creditor's Name Po Box 120568 Newport News, VA 23612	When was the debt incurred?	Opened 5/01/14 Last Active 8/17/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sreport as priority claims	separation agreement or divorce that you did not	
	No	Debts to pension or profit-sh	aring plans, and other similar debts	
	☐ Yes	Other. Specify Collection Healthco	on Attorney Community Mem. enter Er	

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Debtor 1 Stephen Michael Maitland	Page 14 of 43 Case number (if know)	16-32867	
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4.5	Eos Cca	Last 4 digits of account number 3727	\$428.00
	Nonpriority Creditor's Name 700 Longwater Dr Norwell, MA 02061	When was the debt incurred? Opened 8/01/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Attorney At T Mobility	
4.6	Focused Recovery Solut	Last 4 digits of account number 3372	\$632.00
	Nonpriority Creditor's Name 9701 Metropolitan Ct Ste	When was the debt incurred? 10/28/2015	
	North Chesterfield, VA 23236 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Richmond Emergency Physcians	
4.7	Greater VA Medical Group	Last 4 digits of account number 9472	\$75.00
	Nonpriority Creditor's Name PO Box 17085	When was the debt incurred? 12/3/2015	
	Richmond, VA 23226-7085 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
		Пол	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical	
		1,	

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Case 16-32867-KLP Desc Main Document Page 15 of 43 Debtor 1 Stephen Michael Maitland Case number (if know) 16-32867 4.8 \$850.00 **Horizon Fin** Last 4 digits of account number 2045 Nonpriority Creditor's Name Attn: BSA & Fraud Dept When was the debt incurred? Po Box 800 Michigan City, IN 46360 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Med1 02 St Marys Hosp Richmond ☐ Yes **Horizon Fin** 4.9 Last 4 digits of account number 0997 \$787.00 Nonpriority Creditor's Name Attn: BSA & Fraud Dept When was the debt incurred? Po Box 800 Michigan City, IN 46360 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Med1 02 St Marys Hosp Richmond ☐ Yes 4.1 **Horizon Fin** \$525.00 2955 Last 4 digits of account number Nonpriority Creditor's Name Attn: BSA & Fraud Dept When was the debt incurred? Po Box 800 Michigan City, IN 46360 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.

■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Med1 02 St Marys Hosp Richmond ☐ Yes

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Document Page 16 of 43 Debtor 1 Stephen Michael Maitland Case number (if know) 16-32867 4.1 Infectious Diseases Specialist 7784 \$69.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 11768 When was the debt incurred? 2014-2015 Richmond, VA 23230 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify medical ☐ Yes 4.1 Lab. Corp 5531 \$303.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 2240 When was the debt incurred? 2015-2016 **Burlington, NC 27216** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical ☐ Yes 4.1 **MCV Physcians** 9700 \$2.967.00 Last 4 digits of account number Nonpriority Creditor's Name 1601 Willow Lawn Drive When was the debt incurred? 7/9/2015 Richmond, VA 23230-3422 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only

☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Judgement

Case 16-32867-KLP Doc 15 Filed 07/04/16 Entered 07/04/16 17:28:13 Desc Main Page 17 of 43 Case number (if know) Document Debtor 1 Stephen Michael Maitland 16-32867 4.1 **Richmond Ambulance Authority** 0485 \$530.00 Last 4 digits of account number 4 Nonpriority Creditor's Name PO Box 26286 When was the debt incurred? 2/19/2016 2400 Hermitage Road Richmond, VA 23260-6286 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify medical 4.1 Sentara Halifax Regionald Hosp 0075 \$820.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 2204 Wilborn Ave. 5/26/2015 When was the debt incurred? South Boston, VA 24592 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify medical 4.1 Sentra Clarksville Family Med 8637 \$450.00 6 Last 4 digits of account number Nonpriority Creditor's Name **PO Box 860** When was the debt incurred? 2016 South Boston, VA 24592 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

■ Debtor 1 only

□ Debtor 2 only
□ Debtor 1 and Debtor 2 only
□ At least one of the debtors and another
□ Check if this claim is for a community

Is the claim subject to offset?

■ No

■ No

debt

☐ Unliquidated ☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

□ Debts to pension or profit-sharing plans, and other similar debts
■ Other. Specify **medical**

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Case 16-32867-KLP Doc 15 Desc Main Document Page 18 of 43 Debtor 1 Stephen Michael Maitland Case number (if know) 16-32867 4.1 St. Mary's Hospital 2830 \$9,571.24 Last 4 digits of account number Nonpriority Creditor's Name PO BOx 409553 2014-2016 When was the debt incurred? Atlanta, GA 30384-9553 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify medical 4.1 Village Family Psychiatry 6638 \$95.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 31354 When was the debt incurred? 2015 Henrico, VA 23294-3432 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **AMCA** Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 1235 Part 2: Creditors with Nonpriority Unsecured Claims Elmsford, NY 10523 Last 4 digits of account number 5531 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Richmond General District Ct Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims John Marshall Courts Building ■ Part 2: Creditors with Nonpriority Unsecured Claims 400 N. 9th Street, Room 203 Richmond, VA 23219 Last 4 digits of account number 9700 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **VCU Community Memorial Hospita**

125 Buena Vista Circle South Hill, VA 23970-1431

Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 8869

Part 4: Add the Amounts for Each Type of Unsecured Claim

Official Form 106 F/F

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Debtor 1 Stephen Michael Maitland

16-32867

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				-	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	40,396.24
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	40,396.24

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		I A A A A II I I	$\frac{1}{1}$	
Fill in this infor	mation to identify your	case:		
Debtor 1	Stephen Michael	Maitland		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number	16-32867			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Golds Gym 1801 Hydraulic Road Charlottesville, VA 22901	gym membership-retain
2.2	Verizon Virginia Inc 236 E Town St Columbus, OH 43215	cell phone contract-retain

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		Docume	nt Page 21 c	of 43
Fill in this	information to identify your	case:		
Debtor 1	Stephen Michael	Maitland		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case num	ber 16-32867			
(if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
Scheo	lule H: Your Cod	ebtors		12/15
	and case number (if known you have any codebtors? (If			as a codebtor.
■ No □ Yes	5			
Arizon 	hin the last 8 years, have yona, California, Idaho, Louisiana			y? (Community property states and territories include ington, and Wisconsin.)
☐ Yes	s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?	
in line Form	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offic 6G). Use Schedule D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and 2	'IP Codo		Column 2: The creditor to whom you owe the deb
	ramo, rambor, onoot, only, onto and z	0000		Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	
				_
3.2	Nome			Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street	2: .	710.0	_
	City	State	ZIP Code	

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	in this information to										
Dei	otor 1	Stephen Mic	hael Maitland			-					
	otor 2 buse, if filing)					_					
Uni	ted States Bankrupt	cy Court for the	EASTERN DISTRICT	OF VIRGINIA		_					
Cas	se number 16-3	32867					Check	if this is:			
(If kr	nown)			-			☐ An	amende	d filing		
_										g postpetition ollowing date:	
0	fficial Form	<u> 1061</u>					MN	M / DD/ Y	YYY		
S	chedule I: \	Your Inc	ome								12/15
	<u> </u>	Employment	On the top of any additi	Debtor 1	our name	e and			·	ling spouse	question
		han one ioh		■ Employed				☐ Emple	oved	<u> </u>	
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed				
	employers.		Occupation	Assistant							
	Include part-time, self-employed wor		Employer's name	Personal Home	e Care						
	Occupation may ir or homemaker, if it		Employer's address	860 N. Meckele South Hill, VA		Avenu	ie				
			How long employed t	here? less th	at 6 mo	nths		_			
Par	t 2: Give Det	ails About Mor	nthly Income								
	mate monthly inco use unless you are s		ate you file this form. If	you have nothing to	report for	any lii	ne, write	\$0 in the	space. Inc	clude your no	n-filing
	u or your non-filing s e space, attach a se		ore than one employer, co	ombine the information	on for all	emplo	yers for th	hat perso	n on the lir	nes below. If	you need
							For Debt	tor 1		btor 2 or ing spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$_	1,2	274.00	\$	N/A	
3.	Estimate and list	monthly overt	ime pay.		3.	+\$_		0.00	+\$	N/A	
4.	Calculate gross I	ncome. Add lin	ne 2 + line 3.		4	\$	1.27	4.00	\$	N/A	

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Deb	tor 1	Stephen Michael Maitland	-	Case	number (if known)	16-3286	<u> </u>	
				For	Debtor 1	For Deb	tor 2 or	
	Cop	by line 4 here	4.	\$	1,274.00	\$	N/A	-
5.	List	all payroll deductions:						
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	102.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	-
	5e.	Insurance	5e.	\$	0.00	\$	N/A	_
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	_
	5g.	Union dues	5g.	\$_ - \$	0.00		N/A	_
•	5h.	Other deductions. Specify:	5h.⊣	· —		+ \$	N/A	-
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ _	102.00	\$	N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,172.00	\$	N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A	_
	8e.	Social Security	8e.	\$	0.00	\$	N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	_
	8h.	Other monthly income. Specify:	8h.+	- \$_	0.00	+ \$	N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	A
10	Cal	culate monthly income. Add line 7 + line 9.	10. \$		1,172.00 + \$	NI NI	/A = \$	1,172.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. Ψ		1,172.00 T	IN	<u> </u>	1,172.00
11.	State Inches other Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depen	•		ed in Sche	dule J. 1. +\$	0.00
12.		It the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies				a, if it	2. \$	1,172.00
								nea y income
13.	Do y	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?					-

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Fill	in this informa	tion to identify yo	our case:							
Deb	tor 1	Stephen Mic	hael Mait	land		Ch	eck if this is	; :		
Deb	otor 2						An amend	Ü	ing postpetition cha	nter
	ouse, if filing)								the following date:	ptoi
Unit	ed States Bankr	ruptcy Court for the	EASTE	RN DISTRICT OF VIRGIN	IA		MM / DD	/ YYYY		
1	e number 16	6-32867								
Of	fficial Fo	rm 106J								
		J: Your	Exper	ises						12/1
Be info	as complete a	and accurate as	possible.	If two married people arch another sheet to this						
Par		ibe Your House	ehold							
1.	Is this a join									
	■ No. Go to	= .	in a senar:	ate household?						
	_ 100.200									
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.			
2.	Do you have	e dependents?	■ No							
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Deper age	ndent's	Does dependent live with you?	
	Do not state								□ No	
	dependents	names.							□ Yes □ No	
									☐ Yes	
									□ No □ Yes	
									□ No	
•	D								☐ Yes	
3.	expenses of	enses include f people other t d your depende	han $_{m \Box}$	No Yes						
Par		ate Your Ongoi								
exp				uptcy filing date unless y y is filed. If this is a supp						
the		n assistance an		government assistance it luded it on <i>Schedule I:</i> Y			,	Your expe	enses	
(01	ilciai Folili 10	ю.,								
4.		or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgage	e 4.	\$		100.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
	•	rty, homeowner's				4b.			0.00	
		maintenance, re owner's associat	•	ıpkeep expenses dominium dues		4c. 4d.	·		0.00	
5.	Additional n	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	· -		0.00	

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tor 1 Stephen Michael Maitland	Case number (if known)	16-32867
Utilities:		
6a. Electricity, heat, natural gas	6a. \$	0.00
6b. Water, sewer, garbage collection	6b. \$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	120.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	300.00
Childcare and children's education costs	8. \$	0.00
	9. \$	
Clothing, laundry, and dry cleaning	· ———	20.00
Personal care products and services	10. \$	50.00
Medical and dental expenses	11. \$	310.00
Transportation. Include gas, maintenance, bus or train fare.	12. \$	200.00
Do not include car payments.	·	
Entertainment, clubs, recreation, newspapers, magazines, and bo		20.00
Charitable contributions and religious donations	14. \$	0.00
Insurance.		
Do not include insurance deducted from your pay or included in lines 4		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	0.00
15d. Other insurance. Specify:	15d. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in line	es 4 or 20.	
Specify:	16. \$	0.00
Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17a Other Specify:	170 ¢	0.00
17d. Other. Specify:	17d. \$	0.00
· · · · · · · · · · · · · · · · · · ·	·	0.00
Your payments of alimony, maintenance, and support that you did		0.00
deducted from your pay on line 5, Schedule I, Your Income (Offici Other payments you make to support others who do not live with	<u></u>	0.00
		0.00
Specify:	19.	
Other real property expenses not included in lines 4 or 5 of this fo		0.00
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
Other: Specify: work clothes scrubs	21. +\$	10.00
Miscelleneous	+\$	50.00
		03.00
Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	1,180.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official	l Form 106J-2 \$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	1,180.00
220. Add into 22d and 22b. The result is your monthly expenses.	Ψ	1,100.00
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,172.00
23b. Copy your monthly expenses from line 22c above.	23b\$	1,180.00
T_py jour morning orported from mo LEG above.		1,100.00
23c. Subtract your monthly expenses from your monthly income.		
The result is your <i>monthly net income</i> .	23c. \$	-8.00
1110 Todak to your monthly not moonto.		
Do you expect an increase or decrease in your expenses within the	ne year after you file this form?	
For example, do you expect to finish paying for your car loan within the year or d		rease or decrease because
modification to the terms of your mortgage?		
■ No.		
Yes. Explain here:		

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Fill in this info	ormation to identify your	case:				
Debtor 1	Stephen Michael	Maitland				
Dahtano	First Name	Middle Name	Last N	ame		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last N	ame	_	
United States I	Bankruptcy Court for the:	EASTERN DISTRICT (OF VIRGINIA			
Case number (if known)	16-32867					Check if this is an amended filing
	rm 106Dec					
Declara	tion About a	n Individual	Debto	r's Schedule	S	12/15
obtaining mon years, or both.	his form whenever you fi ey or property by fraud ir 18 U.S.C. §§ 152, 1341, 1	connection with a ban				
Did you բ	pay or agree to pay some	one who is NOT an atto	rney to help y	ou fill out bankruptcy for	ms?	
■ No						
☐ Yes.	Name of person					etition Preparer's Notice, nature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	nmary and sch	edules filed with this dec	claration and	
X /s/ St	ephen Michael Maitlar	d	X			
	hen Michael Maitland ture of Debtor 1		S	ignature of Debtor 2		

Date

Date **July 4, 2016**

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E:11	in this info	umation to identify you							
		rmation to identify you							
Deb	tor 1	Stephen Michae First Name	Middle Name	Last Name					
Deb	tor 2								
(Spot	use if, filing)	First Name	Middle Name	Last Name					
Unit	ed States E	Bankruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA					
Cas	e number	16-32867							
(if kno	own)					check if this is an			
					a	mended filing			
Off Off	icial F	orm 107							
Sta	itemen	t of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16			
Be a	s complete	and accurate as possi	ble. If two married people a	re filing together, both are	equally responsible for sup	plying correct			
		more space is needed, wn). Answer every ques		this form. On the top of any	/ additional pages, write you	ir name and case			
iluili	——	wiij. Aliswei every ques	Stion.						
Part	Give	Details About Your Ma	rital Status and Where You	Lived Before					
1.	What is yo	our current marital statu	ıs?						
	☐ Marrie	ed							
	■ Not m	arried							
2.	During the last 3 years, have you lived anywhere other than where you live now?								
	_								
	 No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. 								
	☐ Yes. I	ist all of the places you l	ived in the last 3 years. Do no	ot include where you live now	' .				
	Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
					ity property state or territory co, Texas, Washington and W				
otato	0 4.74 10.771	ooooaa			oo, roxao, rraog.o a.ra ri				
	■ No								
	☐ Yes. N	Make sure you fill out Sch	nedule H: Your Codebtors (Of	ficial Form 106H).					
Part	2 Expl	ain the Sources of You	r Income						
			nployment or from operatin u received from all jobs and a		ear or the two previous caler	ndar years?			
			have income that you receive						
	□ No								
		Fill in the details.							
	_ 103.1	iii iii tiic details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions			
			onoon an trial apply.	exclusions)	onook all that apply.	and exclusions)			
Froi	m January	1 of current year until	■ Wages, commissions,	\$3,612.00	☐ Wages, commissions,				
the	date you fi	led for bankruptcy:	bonuses, tips	*-/-	bonuses, tips				
			☐ Operating a business		☐ Operating a business				

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Debtor 1 Stephen Michael Maitland

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	/ January 1 to December 31 2015)		■ Wages, commissions, bonuses, tips	\$6,514.00	☐ Wages, combonuses, tips	missions,		
				☐ Operating a business		☐ Operating a	business	
		ndar year be o December		■ Wages, commissions, bonuses, tips	\$2,713.00	☐ Wages, combonuses, tips	ımissions,	
				☐ Operating a business		☐ Operating a	business	
5.	Include ir and othe winnings List each	ncome regard r public bene . If you are fil source and	dless of wheth fit payments; ing a joint cas the gross inco	e during this year or the two her that income is taxable. Exa pensions; rental income; inter he and you have income that y home from each source separate	amples of other income are a est; dividends; money collec- you received together, list it of	alimony; child supported from lawsuits; only once under De	royalties; and ebtor 1.	
	⊔ Yes	. Fill in the de	etails.					
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	st Certain Pa	ayments You	Made Before You Filed for I	Bankruptcy			
6.	Are eithe	Neither D	ebtor 1 nor D	's debts primarily consumer bebtor 2 has primarily consu personal, family, or househol	imer debts. Consumer debt	s are defined in 11	U.S.C. § 10°	1(8) as "incurred by an
				re you filed for bankruptcy, di	d you pay any creditor a tota	l of \$6,425* or mo	re?	
		□ No.	Go to line 7	•				
		□ Yes	paid that cr not include	each creditor to whom you pai editor. Do not include paymen payments to an attorney for the	its for domestic support obliquis bankruptcy case.	gations, such as ch	nild support a	nd alimony. Also, do
	_	" Subject	to adjustmen	t on 4/01/19 and every 3 years	s after that for cases filed on	or after the date of	r adjustment.	
	Yes			r both have primarily consure you filed for bankruptcy, di		l of \$600 or more?	,	
		■ No.	Go to line 7					
		□ _{Yes}	include pay	each creditor to whom you pai ments for domestic support ol this bankruptcy case.				
	Credito	r's Name an	d Address	Dates of payme	nt Total amount	Amount you	Was this p	payment for

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Debtor 1 Stephen Michael Maitland

7.	Within 1 year before you filed for bankruptour lnsiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partners r more of their voting	erships of which you g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one for
	No					
	Yes. List all payments to an insider.		_			
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	any property on ac	ccount of a d	ebt that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Pai	rt 4: Identify Legal Actions, Repossession	s and Foreclosures	paiu	Still Owe	include cred	illoi s riairie
I a	tuentiny Legal Actions, Repossession	is, and i orcciosures				-
9.	Within 1 year before you filed for bankruptor List all such matters, including personal injury modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?
	■ No. Go to line 11.□ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	Í			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec. No		luding a bank or fir	nancial institution	, set off any a	amounts from your
	☐ Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date a taken	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		erty in the possess	ion of an assigned	e for the bene	efit of creditors, a
	☐ Yes					
Pai	List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No	tcy, did you give any gifts	s with a total value	of more than \$60	0 per person	?
	Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave fts	Value
	Person to Whom You Gave the Gift and Address:					

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14.	Within 2 years before you filed for band ■ No □ Yes. Fill in the details for each gift or			s with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co.	total	Describe what you contributed		Dates you contributed	Value
Part	t 6: List Certain Losses					
	Within 1 year before you filed for banks or gambling?	ruptcy or	r since you filed for bankruptcy, did y	ou lose any	thing because of thef	t, fire, other disaster
	☐ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the lo e the amount that insurance has paid. Li nce claims on line 33 of Schedule A/B: I	ist pending	Date of your loss	Value of property lost
Parí	t 7: List Certain Payments or Transfe			, ,		
	consulted about seeking bankruptcy o Include any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid			·	d in your bankruptcy. Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You		transferred	erty	or transfer was made	payment
	Nupa Agarwal Attorney at Law PO Box 17275 Richmond, VA 23226 noopaa@yahoo.com		Initial attorneys' fees credit cor credit report, and filing fees	unseling,	May 2016	\$1,450.00
	Within 1 year before you filed for banks promised to help you deal with your cr Do not include any payment or transfer th No Yes. Fill in the details. Person Who Was Paid	editors o	or to make payments to your creditors ted on line 16. Description and value of any proper	s?	Date payment	Amount of
	Address		transferred		or transfer was made	payment
	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a second include yes. Fill in the details.	our busir ers made	ness or financial affairs? as security (such as the granting of a se			
	Person Who Received Transfer		Description and value of	Describe	any property or	Date transfer was
	Address Person's relationship to you		property transferred		received or debts	made
	Buyer		vehicle sold for part-2009 Chevy Malibu	1200.00		February 2016
	None					

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Debtor 1 Stephen Michael Maitland

19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		ny property to a	self-settled	trust or similar device	of which you are a
	Name of trust	Description and v	alue of the pro	perty transf	erred	Date Transfer was made
Par	List of Certain Financial Accounts, Ins	truments, Safe Deposi	t Boxes, and St	orage Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc ■ No □ Yes. Fill in the details.	r other financial accou	nts; certificates	of deposit;		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accordinstrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	rear before you filed for	r bankruptcy, aı	ny safe depo	osit box or other deposi	tory for securities,
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe to	he contents	Do you still have it?
22.	Have you stored property in a storage unit o	r place other than you	home within 1	year before	you filed for bankrupto	y?
	NoYes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		Describe the	he contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else				
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in a for someone.			or, or hold in trust			
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the	he property	Value
Par	t 10: Give Details About Environmental Info	rmation				

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Stephen Michael Maitland

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Date of notice Name of site Governmental unit Environmental law, if you Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Status of the **Case Title** Court or agency Nature of the case **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Employer Identification number Business Name** Describe the nature of the business **Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below.

Date Issued

Name

Address

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Debtor 1 Stephen Michael Maitland

Part 12: Sign Below		
are true and correct. I understand that making	f Financial Affairs and any attachments, and I decling a false statement, concealing property, or obtain to \$250,000, or imprisonment for up to 20 years,	ining money or property by fraud in connection
/s/ Stephen Michael Maitland		
Stephen Michael Maitland Signature of Debtor 1	Signature of Debtor 2	
Date July 4, 2016	Date	
Did you attach additional pages to Your State	tement of Financial Affairs for Individuals Filing fo	r Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did you pay or agree to pay someone who is	s not an attorney to help you fill out bankruptcy for	rms?
■ No		
☐ Yes. Name of Person Attach the Ba	nkruptcy Petition Preparer's Notice, Declaration, and	Signature (Official Form 119).

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Fill in this infor	Fill in this information to identify your case:				
Debtor 1	Stephen Michael	Maitland			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA		
Case number	16-32867				
(if known)				☐ Check if this is an amended filing	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of property	□ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	☐ Yes
securing debt:	Tretain the property and [explain].	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Stephen Michael Maitland	Case number (if known)	16-32867
name:		☐ Retain the property and redeem it.	☐ Yes
		☐ Retain the property and enter into a	
	ption of	Reaffirmation Agreement.	
proper		☐ Retain the property and [explain]:	
securir	ng debt:		_
Part 2:	List Your Unexpired Personal Property Lea	ases	
For any u in the info	nexpired personal property lease that you libration below. Do not list real estate lease	isted in Schedule G: Executory Contracts and Unexpired is. Unexpired leases are leases that are still in effect; the see if the trustee does not assume it. 11 U.S.C. § 365(p)(2)	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's i	name:		□ No
	on of leased		_
Property:			☐ Yes
Lessor's	name: on of leased		□ No
Property:			☐ Yes
Lessor's ı	name:		□ No
	on of leased		
Property:			☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's i	name:		□ No
	on of leased		
Property:			☐ Yes
Lessor's	name: on of leased		□ No
Property:			☐ Yes
Lessor's i	name:		□ No
Description Property:	on of leased		☐ Yes
Part 3:	Sign Below		_ 100
r art 5.	oign below		
	nalty of perjury, I declare that I have indicate that is subject to an unexpired lease.	ed my intention about any property of my estate that sec	cures a debt and any personal
X /s/ \$	Stephen Michael Maitland	x	
	phen Michael Maitland	Signature of Debtor 2	
Sign	nature of Debtor 1		
Date	July 4, 2016	Date	

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In re	Stephen Michael Maitland			16-32867
		Debtor(s)	Chapter	7

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR				
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and tha compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept \$ 1,450.00				
	Prior to the filing of this statement I have received \$ 1,450.00				
	Balance Due				
2.	\$_335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor \square Other (specify)				
4.	The source of compensation to be paid to me is:				
	$\blacksquare \text{Debtor} \Box \text{Other} (specify)$				
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.				
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.				
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Other provisions as needed:				
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following services:				

Case 16-32867-KLP Doc 15 Filed 07/04/16 Entered 07/04/16 17:28:13 Desc Main Document Page 37 of 43 CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

July 4, 2016	/s/ Nupa Agarwal
Date	Nupa Agarwal 42545
	Signature of Attorney
	Nupa Agarwal Attorney at Law
	Name of Law Firm
	PO Box 17275
	Richmond, VA 23226
	(804) 691-2655 Fax: (804) 308-8001

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,050 (For all Cases Filed on or after 1/01/2015)

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SE	CRVICE
The undersigned hereby certifies that on this date the foregoing No and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk' mail). Date	1 ("

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Fill in	this information to identify your case:					rected in this form and	in Form
Debt	or 1 Stephen Michael Maitland		122	2A-1Su	pp:		
Debt	or 2			4 -			
	se, if filing)				•	umption of abuse	
Unite	ed States Bankruptcy Court for the: Eastern District of	Virginia	'	а	pplies will be m	o determine if a presur nade under <i>Chapter 7 i</i> cial Form 122A-2).	
Case (if know	e number 16-32867		,	_	,	,	,
(II KNO	wri)					does not apply now be service but it could ap	
				☐ Che	eck if this is a	n amended filing	
Off	<u>icial Form 122A - 1</u>						
Ch	apter 7 Statement of Your Cur	rent Mor	nthly Inc	ome	9		12/15
attach case r	complete and accurate as possible. If two married people a a separate sheet to this form. Include the line number to whumber (if known). If you believe that you are exempted from ying military service, complete and file Statement of Exempted 1: Calculate Your Current Monthly Income	hich the additior n a presumption	nal information a of abuse becau	pplies. se you	On the top of ar	ny additional pages, writ narily consumer debts o	e your name and r because of
1.	What is your marital and filing status? Check one on	ly.					
	■ Not married. Fill out Column A, lines 2-11.						
	$\hfill\square$ Married and your spouse is filing with you. Fill ou	t both Columns	A and B, lines	2-11.			
	\square Married and your spouse is NOT filing with you.	ou and your s	spouse are:				
	☐ Living in the same household and are not legal	ly separated.	Fill out both Co	lumns /	A and B, lines 2	2-11.	
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are le living apart for reasons that do not include evading	gally separated	d under nonban	kruptcy	law that applie	es or that you and your	
10 the	I in the average monthly income that you received from all stationary 1 (10A). For example, if you are filing on September 15, the 6-mm of 6 months, add the income for all 6 months and divide the total pouses own the same rental property, put the income from that property.	onth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh Aug de any ir	ust 31. If the amo	unt of your monthly incomore than once. For examp	ne varied during le, if both
				Colum Debto		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and commission	ons (before all	\$	1,200.00	\$	
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. \$ 0.00 \$						
	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include regular , your depender	contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession,						
			otor 1				
	Gross receipts (before all deductions)	\$0.00					
	Ordinary and necessary operating expenses	-\$ 0.00	Copy here ->	¢.	0.00	\$	
	Net monthly income from a business, profession, or farm	n \$	Copy liefe ->	Φ	0.00	Ψ	
6.	Net income from rental and other real property	Deh	otor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
i .	Net monthly income from rental or other real property	*	Copy here ->	\$	0.00	\$	
	Interest, dividends, and royalties	т	- -	\$	0.00	\$	
	mio. oot, arriadhao, ana royantos			·			

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				Column A Debtor 1		Column B Debtor 2 or non-filing s	
8. l	Inemployment compensation			\$	0.00	\$	
	Oo not enter the amount if you contend that the amount he Social Security Act. Instead, list it here:	t received was a benef	it under				
	For you \$ For your spouse \$	0.	00				
	For your spouse \$						
	Pension or retirement income. Do not include any am penefit under the Social Security Act.	nount received that wa	s a	\$	0.00	\$	
] ! (ncome from all other sources not listed above. Spe Do not include any benefits received under the Social S eceived as a victim of a war crime, a crime against hur lomestic terrorism. If necessary, list other sources on a otal below.	Security Act or paymer manity, or international a separate page and p	its or	\$ \$	0.00	\$\$	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	
	Calculate your total current monthly income. Add line ach column. Then add the total for Column A to the total		\$	1,200.00	+ \$		= \$1,200.00
Part 2	Determine Whether the Means Test Applies to	o You					Total current monthly income
12. (Calculate your current monthly income for the year.	. Follow these steps:					
,	2a. Copy your total current monthly income from line 1	11		Сору	line 11 h	nere=>	\$1,200.00
	Multiply by 12 (the number of months in a year)						x 12
•	2b. The result is your annual income for this part of the	e form				12b.	\$14,400.00
13. (Calculate the median family income that applies to	you. Follow these step	os:				
ı	fill in the state in which you live.	VA					
ı	fill in the number of people in your household.	1					
ı	Fill in the median family income for your state and size	of household.				13.	\$ 55,055.00
-	o find a list of applicable median income amounts, go or this form. This list may also be available at the bank	online using the link s	pecified	in the separa	te instruc		
14. I	low do the lines compare?						
	4a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	1, There is n	o presum	ption of abuse	9.
•	4b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pre	esumption of	abuse is	determined by	Form 122A-2.
art 3	Sign Below						
	By signing here, I declare under penalty of perjury	that the information of	n this sta	atement and i	n any atta	achments is tru	ue and correct.
	χ /s/ Stephen Michael Maitland				•		
	Stephen Michael Maitland Signature of Debtor 1						
	Date July 4, 2016 MM / DD / YYYYY If you checked line 14a, do NOT fill out or file Form If you checked line 14b, fill out Form 122A-2 and file						

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing tee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.